

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Humane Society Legislative Fund Political Action Committee

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>		<input type="text" value="409141.49"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="392600.24"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="35085.00"/>	<input type="text" value="57233.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="427685.24"/>	<input type="text" value="466374.49"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="34766.69"/>	<input type="text" value="73455.94"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="392918.55"/>	<input type="text" value="392918.55"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Humane Society Legislative Fund Political Action Committee

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	35000.00	55834.00
(ii) Unitemized	85.00	1399.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	35085.00	57233.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	35085.00	57233.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	35085.00	57233.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	35085.00	57233.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	266.69	1955.94
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	266.69	1955.94
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	33000.00	65000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	5000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	5000.00
29. Other Disbursements	1500.00	1500.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	34766.69	73455.94
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	34766.69	73455.94

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	35085.00	57233.00
34. Total Contribution Refunds (from Line 28(d))	0.00	5000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	35085.00	52233.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	266.69	1955.94
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	266.69	1955.94

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA
Transaction ID :

This report is amended to carry through a change to the opening cash on hand resulting from an amendment to a previous report.

Form/Schedule:
Transaction ID:

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 15
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Humane Society Legislative Fund Political Action Committee

A. Kathryn Oliver
Full Name (Last, First, Middle Initial)
Mailing Address 1710 30th Ave W
City Seattle State WA Zip Code 98199-4221
FEC ID number of contributing federal political committee. **C**
Name of Employer PATH Occupation Senior Outreach Associate
Receipt For: Primary General Other (specify) Memo Item
Aggregate Year-to-Date 5000.00

Date of Receipt 03 / 02 / 2016
Transaction ID : **AE075CAE4ABA14690B42**
Amount of Each Receipt this Period 5000.00
 Memo Item

B. Dr. Roger White
Full Name (Last, First, Middle Initial)
Mailing Address 502 16th Street SW
City Rochester State MN Zip Code 55902-2153
FEC ID number of contributing federal political committee. **C**
Name of Employer Mayo Clinic Occupation Physician
Receipt For: Primary General Other (specify) Memo Item
Aggregate Year-to-Date 5000.00

Date of Receipt 03 / 03 / 2016
Transaction ID : **AACAD2CBD97D74442A19**
Amount of Each Receipt this Period 5000.00
 Memo Item

C. Linda Delma
Full Name (Last, First, Middle Initial)
Mailing Address 39 Edgewood Rd
City Summit State NJ Zip Code 07901-3903
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) Memo Item
Aggregate Year-to-Date 5000.00

Date of Receipt 03 / 17 / 2016
Transaction ID : **A2E995AA057524DED89C**
Amount of Each Receipt this Period 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... 15000.00
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 15
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Humane Society Legislative Fund Political Action Committee

A. Kathryn Head
 Full Name (Last, First, Middle Initial)
 Mailing Address 39 Edgewood Rd
 City Summit State NJ Zip Code 07901-3903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Not Employed Occupation Not Employed
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **5000.00**

Date of Receipt **03 / 17 / 2016**
Transaction ID : A75AE810684C4436A89B
 Amount of Each Receipt this Period **5000.00**
 Memo Item

B. Howard Baskin
 Full Name (Last, First, Middle Initial)
 Mailing Address 7106 Riverwood Blvd
 City Tampa State FL Zip Code 33615-2031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation Management Consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **5000.00**

Date of Receipt **03 / 17 / 2016**
Transaction ID : A6DEAC3FCEFF6462CA94
 Amount of Each Receipt this Period **5000.00**
 Memo Item

C. Carole Baskin
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 340189
 City Tampa State FL Zip Code 33694-0189
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Big Cat Rescue Occupation CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **5000.00**

Date of Receipt **03 / 17 / 2016**
Transaction ID : AE816F66159EA49698AE
 Amount of Each Receipt this Period **5000.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	15000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 15
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Humane Society Legislative Fund Political Action Committee

Full Name (Last, First, Middle Initial)
A. Wendy Bernstein

Mailing Address 16300 Jousting Terrace

City Derwood State MD Zip Code 20855-1654

FEC ID number of contributing federal political committee. **C**

Name of Employer National Naval Medical Center Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
03 / 17 / 2016
Transaction ID : AA283C453D0384227983

Amount of Each Receipt this Period
5000.00

Memo Item

Full Name (Last, First, Middle Initial)
B.

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

Full Name (Last, First, Middle Initial)
C.

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	35000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Humane Society Legislative Fund Political Action Committee

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 981540

City El Paso State TX Zip Code 79998-1540

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : B6506ADE8B5804208824

Amount of Each Disbursement this Period

11.95

Memo Item

Full Name (Last, First, Middle Initial)

B. Wells Fargo

Mailing Address 215 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1155

Purpose of Disbursement
Bank Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 11 / 2016

Transaction ID : B8CA341611B714683B1A

Amount of Each Disbursement this Period

5.23

Memo Item

Full Name (Last, First, Middle Initial)

C. Blackbaud, Inc.

Mailing Address 2000 Daniel Island Drive

City Daniel Island State SC Zip Code 29492-7540

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 14 / 2016

Transaction ID : BCD4516C7EDD74EFBB02

Amount of Each Disbursement this Period

249.51

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

266.69

TOTAL This Period (last page this line number only)..... ▶

266.69

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Humane Society Legislative Fund Political Action Committee

Full Name (Last, First, Middle Initial)

A. RUSS FOR WISCONSIN

Mailing Address PO BOX 620061

City Middleton State WI Zip Code 53562-0061

Purpose of Disbursement
Contribution to Committee

Candidate Name
Russell Dana Feingold

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: WI District:

Date of Disbursement

MM / DD / YYYY
03 / 01 / 2016

Transaction ID : B9BC8DDB2086D4C4DB35

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. UDALL FOR US ALL

Mailing Address PO BOX 25766

City ALBUQUERQUE State NM Zip Code 87125

Purpose of Disbursement
Contribution to Committee

Candidate Name
Sen. Tom S. Udall

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: NM District:

Date of Disbursement

MM / DD / YYYY
03 / 02 / 2016

Transaction ID : B42D6F09DB71648E4974

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. RYAN COSTELLO FOR CONGRESS

Mailing Address PO BOX 3154

City West Chester State PA Zip Code 19381-3154

Purpose of Disbursement
Contribution to Committee

Candidate Name
Rep. Ryan A. Costello

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: PA District: 06

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : BDA4B5A01FD164897A4

Amount of Each Disbursement this Period

1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

11000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Humane Society Legislative Fund Political Action Committee

Full Name (Last, First, Middle Initial)

A. STRICKLAND FOR SENATE

Mailing Address PO BOX 2196

City Columbus State OH Zip Code 43216-2196

Purpose of Disbursement
Contribution to Committee

Candidate Name

Ted Strickland

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: OH District:

Date of Disbursement

MM / DD / YYYY
03 / 14 / 2016

Transaction ID : B4004DB38082A47DF9EE

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. HUFFMAN FOR CONGRESS

Mailing Address P.O. BOX 151563

City San Rafael State CA Zip Code 94915-1563

Purpose of Disbursement
Contribution to Committee

Candidate Name

Jared Huffman

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: CA District: 02

Date of Disbursement

MM / DD / YYYY
03 / 15 / 2016

Transaction ID : BC10D47782726414BB19

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. JULIA BROWNLEY FOR CONGRESS

Mailing Address 728 W. EDNA PLACE

City Covina State CA Zip Code 91722-3222

Purpose of Disbursement
Contribution to Committee

Candidate Name

Rep. Julia Brownley

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: CA District: 26

Date of Disbursement

MM / DD / YYYY
03 / 29 / 2016

Transaction ID : B6E211FD41FD34673B6D

Amount of Each Disbursement this Period

2000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

8000.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Humane Society Legislative Fund Political Action Committee

Full Name (Last, First, Middle Initial)

A. FRIENDS OF JOE HECK

Mailing Address PO BOX 750114

City Las Vegas State NV Zip Code 89136-0114

Purpose of Disbursement
Contribution to Committee

Candidate Name

Rep. Joe J. Heck Jr.

Office Sought: House
 Senate
 President
State: NV District: 03

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2016

Transaction ID : B1069ED4042D24CE0997

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. VAN HOLLEN FOR SENATE

Mailing Address 10605 CONCORD ST SUITE 202

City Kensington State MD Zip Code 20895-2526

Purpose of Disbursement
Contribution to Committee

Candidate Name

Chris Vanhollen

Office Sought: House
 Senate
 President
State: MD District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2016

Transaction ID : B583F27EC12944F288C6

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CATHERINE CORTEZ MASTO FOR SENATE

Mailing Address 8020 SOUTH RAINBOW BLVD #100-112

City Las Vegas State NV Zip Code 89139-6483

Purpose of Disbursement
Contribution to Committee

Candidate Name

Catherine Cortez Masto

Office Sought: House
 Senate
 President
State: NV District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2016

Transaction ID : B84924416267249FEB65

Amount of Each Disbursement this Period

5000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

12000.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Humane Society Legislative Fund Political Action Committee

Full Name (Last, First, Middle Initial)

A. JAMIE RASKIN FOR CONGRESS

Mailing Address P.O. BOX 5418

City Takoma Park State MD Zip Code 20913-5418

Purpose of Disbursement
Contribution to Committee

Candidate Name
Jamie Raskin

Office Sought: House
 Senate
 President
State: MD District: 08

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : B202E0C47AF4843B29D8

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Disbursement this Period

--

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Disbursement this Period

--

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2000.00

33000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Humane Society Legislative Fund Political Action Committee

Full Name (Last, First, Middle Initial)

A. Russ Carnahan for Missouri

Mailing Address Po Box 190033

City State Zip Code
Saint Louis MO 63119-6033

Purpose of Disbursement
Contribution to Committee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼
Other

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 31 / 2016

Transaction ID : B10594C4862644CBE8C1

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1500.00

1500.00